

SMC News

The newsletter of the Singapore Medical Council



**SINGAPORE
MEDICAL
COUNCIL**
www.smc.gov.sg

November 2013



What Does it Mean to be a Doctor?

Council Member Profile

Know the SMC President

Professional Matters

Dr Tan Chi Chiu talks about the complaints process

Contents

Opening Message	3
Welcome To The New SMC Newsletter	
Perspectives	4
What Does It Mean To Be A Doctor?	
Event Highlights	5
SMC Physician's Pledge Affirmation Ceremony 2013	
Profile	8
Know The SMC President	
Professional Matters	9
Extracts From A High Court Judgment What Happens When Complaints Are Received?	
What's New	12
Results Of The Singapore Medical Council Elections 2013 Launch Of A New Professional Registration System	

Disclaimer

Comments and opinions made by individuals and parties who have contributed to or interviewed by the SMC Newsletter are solely those of the authors and contributors and do not necessarily reflect the views or policies of the Singapore Medical Council (SMC). While every effort is made to ensure accuracy, SMC bears no responsibility or liability in any way for the content, information, photographs, illustrations and other material in this publication. All materials remain copyright of the SMC and no reproduction is permitted without written authorisation.

Welcome to the New SMC Newsletter



Professor Tan Ser Kiat
President, Singapore Medical Council

Welcome to the first edition of the new SMC newsletter – SMC News. This electronic newsletter aims to engage and inform all doctors. Through useful and interesting content, the Council hopes to signal a new beginning for the Council’s interaction with you. You will get a better understanding of the various functions undertaken by the Council and how they affect doctors professionally. Under the Medical Registration Act, the primary objective of the Council is to protect patients and SMC takes this opportunity to communicate with all doctors to enhance the patient-doctor relationship.

The newsletter will share professional and ethical best practices as well as expert perspectives which could help you enhance the relationship with your patients and avoid common pitfalls which result in complaints. We will update you on the latest initiatives from the Council that help us serve you better. You will also get to know more about our Council members who commit energy and time to the work of the Council. I look forward to your feedback on professional issues as well as on how the Council can function better.

Greater awareness of chronic diseases, rising patient expectations and unforeseen disease outbreaks lead society to look increasingly to doctors to protect and heal. We must always make time to go back to the basics, meaning and ideals of our profession to help us serve patients better and with respect, trust and compassion.

I sincerely hope you enjoy reading this newsletter.

Professor Tan Ser Kiat
President, Singapore Medical Council

What Does It Mean To Be A Doctor?

It's been 11 years since I first stepped into the halls of Imperial College London, marvelling at the history housed in the tiny laboratory of Sir Alexander Fleming, quaintly tucked away on St Mary's Campus in Paddington, and in awe of the many legendary figures in Medicine who had in some way been a part of the institution that I was now a part of. At the young, impressionable age of 19, I could not believe that I, too, would one day be a Doctor.

However, it was not until housemanship that I truly appreciated and learnt what it meant to be a doctor.

I remember coming home from what was a particularly bad day and night on-call whilst in the Department of Internal Medicine. 30 admissions, multiple 'sickies' and a couple of collapsed patients, not forgetting the usual requests to ink up meds, insert IVs and catheterise the patient who wouldn't 'PU' – it was enough to break down the usually stoic and resilient me upon returning home to my concerned mother. Nobody had enquired whether I had had my dinner / toilet break / drink of water throughout my 30 hours at the hospital.

Yet, this is not an uncommon occurrence for all housemen, although life does admittedly get better along the way (except if you're the medical Registrar on call!). So why did I continue? It was definitely not what I had envisioned my first year of being a doctor to be. Times came when I would question if it was really what I wanted to do – be at the beck and call of your patients, try your best and still get complaints from difficult relatives, fail to help or save your patients. It could be quite difficult to remember your motivations when you are tired and demoralised.

But there are the heart-warming moments that your mind clings to, that make it all worth the sleepless nights, countless exams, endless ward rounds, unending courses (BCLS again!). It's the tearful son thanking you for making his father comfortable in the last few days, the young lady who clasped my hand as she told me the story of her bilateral mastectomy, the foreign worker who smiled for the first time in 12 days since losing three of his fingers in an industrial accident. There are many more of these – moments that say: you're a human being who has the skills and the privilege to help somebody else.



I have only recently become fully registered with the Singapore Medical Council, after having spent some time working in the UK. The pledge taking ceremony, held just a few months back, was a solemn yet warm occasion, with a cohort of doctors reciting an oath together. It was similar to a ceremony I had attended upon graduation from Imperial, but with a very different sentiment. Whilst 5 years ago I remember the palpable excitement and elation at having (finally!) graduated, this time the oath held a more serious and reflective meaning to it. (Sort of like renewing your marriage vows, some may say?) The first line of the oath put it perfectly: 'To dedicate my life to the service of humanity' - yes, that is what we do.

Many of us serve with our hearts, tirelessly. We sacrifice time with our own families, our nights, weekends, leisure time, exercise time, makan time, sleep. We wear out many pairs of shoes in the countless hours during ward rounds, we stand for hours operating to save or improve lives.

So what does it mean to be a doctor? For me – it is an honour and responsibility that has been entrusted upon me by my patients, their families and my colleagues. It is more than a job – it is an identity and an ethos that becomes you, shapes how you think, how you react. It teaches you about human suffering, life, love, a simple touch, a kind word, discipline, determination and commitment. It changes how you live.

We all have cherished roles in our lives: I am a mother, wife, daughter, sister and best friend. Today, in addition to these, I feel blessed that being a doctor has also become part of the fabric of who I am.

Dr Suraya Zainul Abidin

MBBS (UK) BSc (Hons) MRCS (London)

(Dr Suraya was the pledge leader at the Feb 2013 pledge ceremony)

SMC Physician's Pledge Affirmation Ceremony 2013

SMC held a Physician's Pledge Affirmation Ceremony at the National University of Singapore Yong Siew Toh Conservatory on 21 September 2013.

The pledge ceremony marks an important milestone in the careers of doctors at the threshold of obtaining full registration status. The pledge is a solemn oath which reminds doctors of their duties and responsibilities to patients and society.

SMC was honoured to have Mr Gan Kim Yong, Minister for Health as the Guest of Honour for the event. More than 300 doctors took the Physician's Pledge witnessed by family and friends.



Welcome Address By SMC President Prof Tan Ser Kiat At SMC Pledge Affirmation Ceremony

On behalf of the Council, let me welcome the 34 conditionally registered and 287 provisionally registered doctors into the fold of the Profession.

The practice of Medicine today has become very complex and complicated indeed. Not only are you required to keep up with quantum leaps made in scientific knowledge and technology, you also have to navigate a rapidly evolving and changing social, economic and political environment. In addition, it will be impossible for you to deliver holistic care individually, especially for those of you working in institutions. You need to work as a team with your fellow colleagues in Nursing, Allied Health, Management as well as with the loved ones of patients.

Remember, that one thing has not and will not change throughout the history of Medicine in spite of the tremendous scientific progress made. And it is for this reason, I hope, all of you chose to enter the Profession – a profession that exists solely to look after the ill, the infirm and the injured, irrespective of their socio-economic and religious backgrounds with the highest moral and ethical values.

This profession is indeed a noble one that society respects, trusts and has confidence in. You will do well to remember this, especially in times of doubt when making decisions. You have the ethical obligation and responsibility of ensuring that the interest and wellbeing of your patients

come first and is paramount. Societal and the public's expectations of doctors are indeed high and this is evidenced by the comments of the Court of 3 Judges in a recent case that went before them for judgment. I quote:

“Indeed, the proposition that the spirit of public service and the existence of ethical obligations underpin all professional practice applies with equal (and, arguably, even greater) force to medical practitioners, whom we collectively entrust with our health, our well-being and, in certain instances, our lives. In this respect, the medical profession occupies a unique societal position of both great privilege and commensurate responsibility”

It is also worth noting that this view transcends time and is shared by past, present and hopefully future generations. During its formal opening on 28 September 1905, the **Federated Malay States and Straits Settlement Medical School** (the original medical school evolving into today's YLLSM), in his address to the pioneer batch of 28 students, Sir John Anderson the then Governor of the Straits Settlement said:

“What I want you to remember is that the course of study you are about to enter upon is not merely a course of study which is intended to enable you

to earn a living, but a passport to membership of a very great profession, a profession in many instances of unselfish devotion and splendid achievement, a profession with very lofty ideals and one which calls for all the very best qualities, mental and moral which a man can give. It demands not only freshness and vigour of body, but steadiness and skill in hand and eye. It wants infinite patience and keenest sympathy, and to all these qualities there has to be added unfaltering courage”.

Today, as you take this Physicians' Pledge, you will do well to remember the great faith, trust and confidence that society and your patients place in you. By taking this Pledge, you are making a lifelong personal commitment to your patients, your profession and society. You must never betray their faith and trust they place in you. I hope you will always remember the solemn words from this Pledge as they will be your guiding light in your professional life.

I wish you all the most gratifying and fulfilling careers, caring for your patients. Thank you. It is now my pleasure to invite our Guest-of-Honour, Minister for Health, Mr. Gan Kim Yong to address us

Speech By Minister Gan Kim Yong, Minister For Health At The Singapore Medical Council (SMC) Physician's Pledge Affirmation



First, my congratulations to all of you who can now look forward to practise in Singapore with full medical registration. Today is a significant moment to reflect on as you embark on your career and for some of you, perhaps the only occasion in your life you will ever raise your hands to recite the Physician's Pledge.

Professionalism, Integrity and Honesty

The Pledge is a lifelong commitment to the high standards of professional conduct, integrity, honesty and ethical practice in medicine. Much trust has been placed upon you by both the society and your patients to provide not only the best medical care for them but also treat them with respect and compassion. This professional esteem from generations past can be easily eroded if care is not taken to preserve it.

The solemn promises that you make today must always be the steady compass to guide your professional decisions and ethical conduct in practice.

Ethics in Medicine

The professional conduct and standards of a medical practitioner in Singapore is guided by the Ethical Code and Ethical Guidelines of the Singapore Medical Council (SMC). These guidelines have been built on the practices

of physicians over the centuries as documented carefully since the time of Hippocrates. It is important that you read them carefully and always be morally upright and ethically correct in your practice. I was informed that the SMC will be looking into a new edition of the Ethical Code and Ethical Guidelines. This has become necessary in the face of advances and new challenges in medical practice. Some of these include telemedicine, the electronic medical record, new innovations and technologies in medicine and commercialised medical practice. Patient confidentiality, the doctor-patient relationship and mutual trust must be preserved in the face of these changes in modern medicine. The use of social media as a discussion forum may result in inappropriate or unprofessional comments, intentionally or otherwise, or even worse, a breach of confidentiality resulting in disciplinary actions. Such issues need to be addressed in the new edition of the Ethical Code and Ethical Guidelines.

Over the years, unfortunately, there are physicians who have gone astray and whom the SMC had to deal with firmly. Most of the complaints against medical practitioners have involved the breach of the Council's Code of Ethics and ranged from gross professional negligence, incompetence and inappropriate prescription of drugs, to communication issues with the patients.

Fortunately, such ethical breaches are not reflective of the good practice of the majority of the doctors in Singapore and the number of complaints remains few relative to the number of doctors. We must always keep it this way. In the postgraduate training of doctors, ethics and professionalism are always emphasised.

Introduction of the Expanded TY Program

To improve the training of doctors, our hospitals will also be gradually expanding the structured training of the Transitional Year (TY) Programme so as to include most or all local medical school graduates in the first year of their training, commonly termed Post Graduate Year 1 or PGY1 in the medical training system.

This expanded Transitional Year programme will provide a homogenous structured training framework to start our doctors on the right footing and improve their competency from the start of their career. The progressive implementation of structured training enables the smooth adjustment of manpower arrangements in the healthcare system.

Introduction of National Assessment Committee (NAC)

This year, the first batch of medical students in the Lee Kong Chian School of Medicine started their learning journey. The entry of this new school is an exciting and

historic moment for those of us who are involved in its inception and implementation. It adds much welcomed diversity into our medical education.

The Ministry of Health has also set up the National Assessment Committee, known as NAC in short, to develop a national framework for a common appraisal of provisionally registered post graduate year 1 or PGY1 students. The Committee comprises senior doctors comprises of the Deans of the three medical schools and chaired by the Director of Medical Services of my Ministry. This Committee will assume the role of the House Officers Training Committee or the HOTC.

The National Assessment Committee will ensure that every first year graduate doctor goes through standardised learning experiences to achieve safe practice. The fundamental competencies in their on-the-job training include, besides medical knowledge, such areas as Professionalism, Communication Skills, Patient Care and Technical Skills, Practice-Based Learning and Improvement. You should be familiar with these competencies to be a good doctor. As a healthcare professional in Singapore, you would also need to acquaint yourself with our system of health care, including the social and financial systems, to be able to understand the needs and anxieties of your patient, and the system-based approach to medical practice. You are not alone but part of a team in the system of care as one eminent physician said, "One doctor will not save lives, but the team will".

Conclusion

In conclusion, while we continue to improve the medical training system to nurture clinically competent doctors and other healthcare professionals, there is something only you can do and maintain continuously. This is the practice of personal morals, ethics and professionalism with sincerity and with a heart. Medicine is a calling which starts with compassion and respect for your fellow man or woman because none of us want to be sick or be a difficult patient. You have that privilege to understand the patients and to cure, relieve and always comfort them. I congratulate you for your success that has brought you here today to take the pledge with your colleagues and with the Singapore Medical Council. May your happiness, fulfilment and satisfaction be in making the patient and his or her family well; and offer them the best outcome you can provide. Congratulations and a great afternoon ahead.

Know The SMC President

Professor Tan Ser Kiat



Professor Tan Ser Kiat, a well-known orthopaedic surgeon and mentor at the Singapore General Hospital, has contributed to healthcare in many capacities. Professor Tan is a strong advocate for quality medical education and mentoring of younger doctors. He has his name in more than 30 peer-reviewed publications and 100 invited presentations and lectures. He was appointed Clinical Professor in the National University of Singapore in 2001.

He became the Group Chief Executive Officer (GCEO) of Singapore Health Services (SingHealth) in 2000, a position he held until 2012 and is currently the President of the Singapore Medical Council. He continues to serve as a Board Member with SingHealth and holds concurrent appointments as Chairman of SingHealth Foundation and Emeritus Consultant in the Department of Orthopaedic Surgery, Singapore General Hospital. He is also a member of the Public Service Commission. Beyond his professional appointments, Professor Tan actively contributes to the community, such as serving on the Board of the Movement for the Intellectually Disabled of Singapore as President from 1994 and subsequently as its Advisor from 2003.

Professor Tan was elected as the President of the Singapore Medical Council in October 2010 and was recently reappointed to the Council in August 2013 for a new three-year term.

Q: What do you love about being a doctor?

It is about seeing my patients benefiting and recovering from their illnesses and injuries from my treatment. The great satisfaction I obtain from knowing that my intervention and treatment have helped to improve their illnesses and made a difference in their lives, goes beyond and above anything else.

Q: Why did you join SMC?

I want to contribute towards continuously raising the already high standards of medical practice in Singapore and to uphold the honour, trust and respect that society has placed on our profession.

Q: How do you manage your many roles?

It is all about effective time management, prioritisation and delegation. I've been blessed with great colleagues and a wonderful team which makes my job easier.

Q: What are your hobbies?

I don't really have any serious hobbies. I used to love deep sea fishing but have given that up due to time constraints. I play the occasional game of golf (badly though) with friends.

Q: What is your favourite hawker food?

I know it is sinful but I love Laksa and Fried Kway Teow!

Q: What do you like to read for pleasure?

Mainly non-fiction magazines like Nature and Science.

Q: What is your advice for young doctors?

Each and every one of us will, from time to time, be faced with great personal, moral and ethical dilemmas and come to many crossroads in our professional lives. It will do well for all of us, young or established doctors, to remember the very reason why we chose to do Medicine and we will make the right decisions. For the younger doctors, remember you have a great career ahead of you – work hard conscientiously to improve the care you provide for your patients and you will be well rewarded professionally.

Extracts From A High Court Judgment

Comments On The Medical Profession

In July this year, the High Court ruled on an Appeal by Dr Lim Mey Lee Susan against a Disciplinary Committee's decision. The High Court included in its written judgment, many statements that apply to the practice of medicine. These included a brief analysis of what a profession means, a reminder of some of the ethical obligations of a doctor and some comments on the significance of the medical profession in society. For the benefit of doctors who may not have read the entire judgment, we have quoted extracts of some of the more salient points which were made in pages 24 -36 and 52 of the judgment about the significance of the medical profession. Please note that this is not intended to be either an exhaustive summary of the very detailed and well thought out judgment or a substitute for reading the entire 110 page judgment. However, what is intended here is for these excerpts to revisit some of the fundamental concepts and principles of our profession which were aptly restated in the judgment.

The practice of medicine entails ethical obligations

In addition to the expectations of a profession in general, the judgment noted of the medical profession, that "the idea that the practice of medicine is, above all, a calling of the highest order is a historical cornerstone of the medical profession".

The judgment noted, "that in both the legal as well as the medical professions, each person admitted to practice makes a public declaration just prior to embarking on his or her career." The doctor's declaration, "can be traced through the millennia – through countless doctors who have taken, in one form or another, a version of what has oft been hailed as one of the world's first ethical codes, the Hippocratic Oath. In Singapore, this oath currently takes the form of the Singapore Medical Council Physician's Pledge ...taken by every doctor upon being admitted as a fully registered medical practitioner and which reads as follows:

I solemnly pledge to dedicate my life to the service of humanity; give due respect and gratitude to my teachers; practise my profession with conscience and dignity; make the health of my patient my first consideration; respect the secrets which are confided in me; uphold the honour and noble traditions of the medical profession; respect my colleagues as my professional brothers and sisters; not allow the considerations of race, religion, nationality or social standing to intervene between my duty and my patient; maintain due respect for human life; use my medical knowledge in accordance with the laws of humanity; comply with the provisions of the Singapore Medical Council's Ethical Code and Ethical Guidelines; and constantly strive to add to my knowledge and skill. I make these promises solemnly, freely and upon my honour. (emphasis added in bold italics)
- from High Court judgment

The Pledge, the judgment stated, is explicit in its reference to ethical obligations and values. "In our view, this pledge constitutes no mere rhetoric. Instead, it embodies ... a calling that seeks, amongst other obligations, to be *helpful to others in an important way* (here, by curing the sick) and goes *beyond* mere money-making and the advancement of self-serving interests."

The judgment goes on to observe that "Indeed, the proposition that the spirit of public service and the existence of *ethical* obligations underpin all professional practice applies with equal (and, arguably, even greater) force to medical practitioners, whom we collectively entrust with our health, our well-being and, in certain instances, our lives. In this respect, the medical profession occupies a unique societal position of both great privilege and commensurate responsibility."

Referring to a past case, the judgment said "As also articulated by this court: ... The importance of maintaining the highest level of professionalism and ethical conduct has been duly acknowledged by the [Singapore Medical Council] in the Introduction section of the [Singapore Medical Council] Ethical Code (at p 1):

The medical profession has always been held in the highest esteem by the public, who look to their doctors for the relief of suffering and ailments. In modern medical practice, ***patients and society at large expect doctors to be responsible both to individual patients' needs as well as to the needs of the larger community. Much trust is therefore endowed upon doctors to do their best by both.*** This trust is contingent on the profession maintaining the highest standards of professional practice and conduct." (original emphasis in italics; emphasis added in bold italics) - from High Court judgment

The ethical obligations extend to charging

The judgement also referred to several provisions in the SMC Ethical Code and Ethical Guidelines (ECEG), including the following:

“A doctor shall not let financial considerations imposed by his own practice, investments or financial arrangements, influence the objectivity of his clinical judgement in the treatment of his patients.”

Further, as regards charging, the High Court’s general statements included the following:

“Returning to considerations of general principle, it is clear that as a professional, a doctor cannot rely solely on the morals of the marketplace. As a member of an honourable profession which is rooted in the ideal of public service, a doctor has higher ethical obligations which are founded on a relationship of trust and confidence ...Viewed in this light such ethical obligations necessarily trump contractual or commercial obligations where there is a conflict between the two.”

The High Court explained, “ that the relationship between a professional and his or her client is founded on trust and confidence is so basic as to underpin every professional relationship and indeed applies with arguably greater force to medical practitioners, given the particular vulnerability of those who seek out medical services and the high stakes involved in many medical decisions. The especial vulnerability of patients and their dependence on health care professionals are heightened by the reality that information is (in the nature of things) distributed unequally in the medical setting, with the medical professional possessing far more information than his or her patient ...It is therefore clear, in our view, that every doctor is under an ethical obligation to charge a fair and reasonable fee for service rendered. The corollary of this is that overcharging would ... constitute

conduct that is dishonourable to the doctor as a person as well as in his or her profession, ie it would constitute professional misconduct within the meaning of s 45(1)(d) of the MRA.”

In summing up its analysis of the profession, the judgment said “We would like to emphasise, in the circumstances, that fostering a culture of ethics and striving to achieve the ideals embodied within the practice of medicine as a whole represent the only meaningful way to approach the questions that matter in this profession.”

The SMC believes the analysis of the medical profession in the judgment serves as a timely reminder to all of us of the special status of the medical profession and the responsibilities which accompany this privileged position. The SMC affirms the good work of our doctors. Doctors should continue to uphold the profession’s high standards of ethics and so sustain the trust of our patients and of the larger community.



What Happens When Complaints Are Received?

The rate of complaints against doctors per 1000 doctors has been relatively stable over the past few years. The impression that more complaints are being lodged every year also arises from an ever increasing number of practitioners in Singapore and thus more complaints overall. Doctors are justifiably worried that they may be the subject of complaints and are also concerned that some of these complaints received are anonymous or frivolous. However, complaints must

have sufficient merit to make it through the preliminary rounds of inquiry to a hearing before a Disciplinary Committee or Tribunal. The Singapore Medical Council (SMC)’s statistics show that, over the past 5 years from 2008 to 2012, only about 12% of concluded cases came before Disciplinary Committees/Tribunals.

Anonymous complaints and other information which is received (without a statutory declaration) are carefully screened by a standing committee of SMC to establish whether there is sufficient information to raise serious concerns about a doctor's behaviour or performance which warrants a referral to the Chairman of the Complaints Panel (CCP). Under the Medical Registration Act (MRA), formal complaints must be referred to the CCP for action.

Under the current MRA, every Complaints Committee (CC) comprises an SMC member as chairman, a senior doctor on the Complaints Panel and a lay member of repute, who is also on the Complaints Panel. Complaints are aggregated so that each CC has a number of cases to consider. Sometimes, where appropriate, the complaints are grouped together according to subject matter. A CC must convene, for the first time, to determine whether the information before it raises sufficiently significant questions of professional conduct or performance to direct a full investigation by the SMC's Investigation Unit (IU). The CC may direct the IU to obtain specific information required for them to evaluate the complaints. This may include the doctors' own statements and the CC may request for independent expert opinions. If the CC deems the matter frivolous, vexatious, misconceived or lacking in substance, it will forthwith dismiss the complaint. If the matter is genuine but the CC decides that no investigation is necessary, it can also issue a letter of advice to the doctor or refer the matter for mediation.

When the IU completes its investigations and has submitted its report on the cases, the CC will re-convene to decide whether there are sufficient grounds to refer the doctor to a Disciplinary Tribunal (DT). Even if such a referral is made, the CC makes no determination as to whether the doctor is culpable. A referral only means that significant and substantive questions have arisen as to the doctor's conduct or performance which warrants a full hearing.

If the CC is of the view that no formal inquiry by a DT is necessary (or Health Committee if the matter concerns a doctor's physical or mental fitness to practise), the CC may issue a letter of advice if the matter is relatively trivial, issue a letter of warning if the matter is relatively serious but does not cross into the realm of professional misconduct, order the doctor to seek and undergo medical or psychiatric treatment or counselling, direct the doctor to undertake and complete further education or training, or to seek and take advice in relation to the management of his medical practice. In some instances, by agreement with the doctor concerned, steps can be taken for the doctor to be withdrawn from practice for a time or permanently. The CC can also decide to refer the matter for mediation or make any other order it sees fit. At

this stage, the CC can still dismiss the complaint entirely if it is considered to be without merit following investigation.

It is important to know that, even if a complainant wishes to withdraw the complaint at any stage of the proceedings, SMC may still direct the process to continue if it considers the issues which have been raised to be sufficiently serious to warrant a full inquiry, for example, if there are issues of public safety at stake.

Many complaints do not end up before the DTs because they arise from lack of communication, miscommunication or misunderstanding between doctors and patients or relatives, rather than serious management or professional issues. Furthermore, even when complaints do arise from issues more serious than poor communication, these are usually made against doctors when the patient-doctor relationship is weak and trust is lacking.

How should doctors respond when notified of complaints against them? It is important not to overreact. If indeed the doctors have reason to believe that they have a case to answer (and doctors generally know this in their heart of hearts), then perhaps it is necessary to engage legal counsel to help them respond to the complaint. However, doctors equally believe they know when they have done their best and are not lacking in their professional behaviour or performance. Such doctors should have confidence in themselves, as well as in the system in place, to ensure fairness and justice is achieved. Doctors should cooperate with any investigation that may take place and when asked, they should write their own responses from their own points of view supported by medical records, alternative opinions and testimonies as appropriate. Indeed, the majority of doctors' responses to complaints are not crafted by lawyers. CCs have found letters written by doctors to be more than adequate to help them make clear decisions in many cases.

One final note: Keeping detailed medical records is of paramount importance when defending yourself against complaints. In cases where the doctors have done the right thing and have good medical records to reflect this, the complaints generally do not end up before the DTs. Conversely, poor case records can lead to DTs as a full hearing is necessary in the absence of sufficient documentary evidence to establish the full facts of the case. Poor case notes of themselves can become evidence of inappropriate or poor management and when truly appalling, can themselves become the subjects of charges to be heard by DTs. The importance of keeping detailed medical records cannot be over-emphasised.

Dr Tan Chi Chiu
SMC Council Member
Chairman SMC Ethics Committee

Results Of The Singapore Medical Council Elections 2013

The Singapore Medical Council (SMC) Elections 2013 were held from 3 to 20 September 2013. The elections were held to fill two available positions in the Medical Council arising from the end of term of office of two elected members.

Five candidates stood for the elections. Out of the total of 8428 fully registered doctors eligible to vote, 8288 doctors (i.e. 98.3%) cast their votes. The number of votes received by each candidate who stood for the elections is as follows:

Candidate's Names	Number of Votes
Dr Chua Swee Boon Raymond	2,553
Dr Hong Ga Sze	3,172
Dr Indumathi Venkatachalam	868
Dr Leong Choon Kit	2,745
Dr Zuraimi Bin Mohamed Dahlan	935

Dr Hong Ga Sze and Dr Leong Choon Kit were elected as they were the top two candidates by number of votes. They will serve for a term of three years with effect from 11 October 2013.

Our congratulations to the successful candidates and we would also like to thank all the candidates and voters who participated in the elections.



Launch Of A New Professional Registration System

A new Professional Registration System (PRS) for the Singapore Medical Council (SMC), will be launched at the beginning of 2014.

The new PRS system will replace aging technologies and streamline the processes of all the healthcare professional boards into a common online system to serve our healthcare professionals, institutions, professional bodies and the general public.

A common registration number format will be used to identify healthcare professionals for all the various professional boards. SMC will provide updates to doctors on the new system roll-out.

Feedback

If you have any feedback or comments on any articles in this newsletter, please contact us at smc_newsletter@smc.gov.sg

Newsletter Editorial Committee

A/Prof Chew Suok Kai
Dr Tan Kok Soo
A/Prof Chen Fun Gee
Asst Prof Raymond Chua
Dr Lau Hong Choon